



# HAWAII STATE ETHICS COMMISSION

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P.O. Box 616, Honolulu, Hawaii 96809  
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## GIFTS DISCLOSURE STATEMENT

*(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)*

NAME:  
Linda L. Smith

STATE POSITION:  
Senior Policy Advisor

STATE AGENCY:  
Office of the Governor

STATE TEL. NO.:  
586-5330

STATE MAILING ADDRESS:

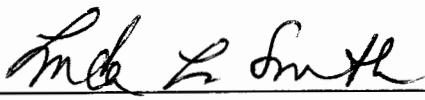
415 S. Beretania St., 5<sup>th</sup> Floor  
Honolulu, HI 96813

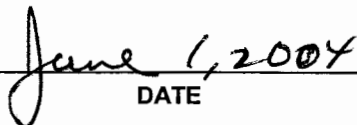
1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
	None								

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
			RECEIVED						
			'04 JUN -3 A11 '10						
			STATE OF HAWAII STATE ETHICS COMMISSION						

Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

  
SIGNATURE

  
DATE